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Substitute for FORM PTO-1449			Attorney Docket Number 101.0084-00000		Customer No. 22882				
INFORMATION DISCLOSURE CITATION IN AN APPLICATION			Applicant Gary K. Michelson, M.D.		Application Number 09/457,228				
Use several sheets if necessary)			Filing Date		Group Art Unit Examiner				
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U.S. PATENT DOCUMENTS									
EXAMINER	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE			
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EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP § 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to the applicant.									

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